# Summary of Verification: Free and Reduced-Price Meal Applications

> The verification process must be completed by **December 15, 2004**.
> Complete and return this form to School Nutrition Programs by **February 15, 2005**.

Verification does not apply to:

- Children in split-session kindergarten programs participating in the Special Milk Program;
- Residential Child Care Institutions, except for applications for attending day students; and
- Schools using Special Provisions 2 in non-base years.

Please Note: Although applications approved as Free Eligible due to Direct Certification Letters, Homeless Liaison List and Administrative Applications are not subject to verification, **the number of students approved as Free Eligible because of this eligibility information must be documented in Section 1.a. on this form.**

School District _____     Agreement # :___ ___ - ___ ___ ___ ___

Number of Schools Operating the Lunch Program _____     Enrollment_____

Check One:  Public Schools _____     Private Schools _____

## Application and Eligibility Information:

Total # of Applications approved for free or reduced (Section 1+ Section 2 below): _____

| *Report the number of applications and students approved for each eligibility type as of October 31, 2004* | # Approved Applications | # Students |
|---|---|---|
| 1. Total Free Eligible | | |
|    1.a. Number approved as Free Eligible who are not subject to verification (i.e. directly certified, homeless or administrative) | | |
|    1.b. Number approved as Free Eligible based on Food Stamps, FAIM or FDPIR case number submitted on an application | | |
|    1.c. Number approved as Free Eligible based on income/household size information submitted on an application | | |
| 2. Total Reduced-Price Eligible | | |

## Results of Verification:

Total # of Applications Verified: (This should be equal to 3% of Section 1.b. + 1.c. + 2 above): _____
Check One:  Random Sample _____     Focused Sample _____

| *Report the number of applications and students verified by application type. These should **not** include applications listed in 1.a.* | | Free Eligible based on FS, FAIM, or FDPIR case # | Free Eligible based on income | Reduced-Price Eligible |
|---|---|---|---|---|
| 3. Responded and No Change | # Applications | | | |
| | # Students | | | |
| 4. Responded and Changed to Free | # Applications | | | |
| | # Students | | | |
| 5. Responded and Changed to Reduced | # Applications | | | |
| | # Students | | | |
| 6. Responded and Changed to Paid | # Applications | | | |
| | # Students | | | |
| 7. Did Not Respond, Changed to Paid | # Applications | | | |
| | # Students | | | |

_____          _____
Signature of School District Official                                      Date Completed